

A STUDY TO EVALUATE THE ASSOCIATION OF POST TEACHING KNOWLEDGE SCORES OF IMPORTANCE OF EARLY INITIATION OF BREAST FEEDING WITH SELECTED DEMOGRAPHIC VARIABLES AMONG PRIMIGRAVIDA MOTHERS AT SELECTED RURAL AREAS OF BANGALORE.

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ABSTRACT

"Mothers are not dropped from heaven. They are born as undervalued, neglected girls and grow as exploited uneducated children. We must look at the suffering and disadvantages, would be mother has experienced. She must become self-confident and self-reliant and for that she needs to be educated and employed".

A report of Global strategy for infant and young child feeding, jointly developed by WHO & UNICEF (2000) says, "Malnutrition has been responsible directly or indirectly for 60% of the 10.9 million deaths annually, which are often associated with inappropriate feeding practices and occur during the first year of birth. Ingestion of unsafe water instead of breast milk contributes to about 1.5 million child deaths.

AIM: the Association of post teaching knowledge scores of importance of early initiation of breast feeding with selected demographic variables

SETTINGS AND DESIGN

Pre-experimental one group pre-test post-test design. 200 primi gravida mothers who met sampling criteria were selected by using non-probability convenience sampling for the present study. The knowledge of primi gravida mothers were assessed using a structured knowledge questionnaire followed by a planned health education programme. Post-test performed on the second day using the same tool. The results were described by using descriptive and inferential statistics.

RESULTS

The association in among post-test knowledge level of primi gravida mothers with selected demographic variables revealed that the variables such as age in years ($p < 0.027$), educational status ($p < 0.009$), type of family ($p < 0.041$), Did you give first breast milk to your baby ($p < 0.001$) and Are you doing exclusive breast-feeding ($p < 0.001$) found significantly associated with post-test knowledge level of primi gravida mothers. Hence for these variables the research hypothesis H2 accepted, whereas for other variables religion ($p < 0.245$), monthly family income in Rs. ($p < 0.745$), occupational status ($p < 0.654$), diet pattern ($p < 0.813$), period of gestation ($p < 0.441$), type of delivery ($p < 0.847$), gender of baby ($p < 0.458$) and Birth weight of baby ($p < 0.329$) found non-significant, hence for these variables the research hypothesis H2 rejected.

KEYWORDS: Exploited, reliant, malnutrition

INTRODUCTION

Early initiation of breastfeeding within one hour of birth can decrease neonatal death. However, the prevalence of early initiation of breastfeeding is approximately 50% in many developing countries, and data remains unavailable for some countries. The WHO recommendation is to start breastfeeding for a neonate in the first hour of life and continued breastfeeding up to two years of age or beyond (Takahashi K et al 20017).

The first trimester carries the highest risk of miscarriage (natural death of embryo or foetus). The second trimester is from week 13 through 28. Around the middle of the second trimester, movement of the foetus may be felt. At 28 weeks, more than 90% of babies can survive outside of the uterus if provided high-quality medical care. The third trimester is from 29 weeks through 40 weeks (Artal-Mittelmark R 2019).

Human breast milk is the optimal feeding for all children. According to World Health Organization (WHO) optimal breastfeeding includes early initiation of breast feeding, exclusive breast feeding for 6 months, frequent feeding, continuous breast feeding for 2 years and increase frequency of feeding during illness. WHO defines early initiation of breastfeeding as it is the initiation of breast milk feeding within 1 h after delivery (WHO 2015)

Exclusive breastfeeding or feeding only breast-milk eliminates the ingestion of pathogenic micro-organisms through contaminated water, other fluids, and foods. It also prevents damage to the immunologic barriers in the infant's gut from contaminants or allergenic substances in infant formula or food. (MC et al 20014)

The importance of early initiation of breastfeeding is recognized by the World Health Organization (WHO), which recommends that all newborns born at term or with a gestational age greater than 32 weeks or birth weight greater than 1500 grams be put to the breast within the first hour of life. (AL et al 1990)

OBJECTIVE

To find out relationship between scores of knowledge of importance of early breastfeeding & selected socio-demographic variables of primi-gravida mother

REVIEW OF LITERATURE

Srivastava S, Chaturvedi N (2021) A study analyzed and ascertain knowledge and compliance of early initiation of breastfeeding practice of mothers and to find the association with socio demographic variables. The cross-sectional analytic design was adopted to investigate knowledge and compliance of early initiation of breastfeeding among mothers of children 0-24 months in Behraich districts of Uttar Pradesh. Lactating mothers with the children in the age group 0-24 months were included in the study. It is found that mother's knowledge level is average about infant and young child feeding components; about 68.3 % mothers have knowledge on initiation of breast-feeding within an hour of birth while 23.3 % of mothers had initiated the breastfeeding within 6 hours after the birth of child. Majority of the mothers had the knowledge of colostrums and early initiation of breastfeeding but there was a noticeable deficit in the implementation of the knowledge in the frequency of breastfeeding practices. Further, it was found that majority of mother feed their child as per their demand. None of them was feeding their child in every two hours. Therefore, there is urgent need to address the existing gaps, socio-cultural barriers and misconceptions prevailing in the community and it are essential to take necessary steps taken in helping mothers to fully carry out the responsibilities of nurturing and nourishing the child.

Sharma IK, Byrne A (2020) An institutional-based cross-sectional study was used in South Gondar Zone hospitals. A total of 356 mothers delivered by vaginal were included. Data was collected using a questionnaire administered by the interviewer. To classify factors correlated with the outcome variables, logistic regression statistical analyses were used. In the study area, the prevalence of early breastfeeding initiation among vaginally delivered mothers was 88.2%. Mothers who had unintended pregnancy had professional guidance and experience with breastfeeding among vaginal delivered mothers were positively correlated with early breastfeeding initiation. The type of pregnancy and professional guidance among vaginally delivered mothers were significantly associated with early initiation of breastfeeding.

Community-based education and counselling on breastfeeding for pregnant mothers and encouraging all mothers to start early breastfeeding.

Abie BM, Goshu YA (2019) A study was conducted to assess early initiation of breastfeeding and colostrum feeding practice among mothers of children aged less than 24 months. Two hundred ninety-seven (297) mothers of children aged less than 24 months participated which made the response rate of 98.1%. Among a total of 297 participants, early initiation of breastfeeding was practiced by 76.8% of mothers. Nearly three-fourths (74.4%) of mothers gave colostrum to their index child. Improving practice of initiation of breastfeeding and colostrum is recommended by counseling women regarding breastfeeding during ANC visit.

METHODOLOGY

Pre-experimental one group pre-test post-test design. 200 primi gravida mothers who met sampling criteria were selected by using non-probability convenience sampling for the present study. The knowledge of primi gravida mothers were assessed using a structured knowledge questionnaire followed by a planned health education programme. Post-test performed on the second day using the same tool. The results were described by using

descriptive and inferential statistics

RESULTS

SECTION-I: FINDINGS IN RELATION TO ASSOCIATION OF POST-TEST LEVEL OF KNOWLEDGE WITH SELECTED SOCIO-DEMOGRAPHIC VARIABLE AMONG PRIMI GRAVIDA MOTHERS.

Table: 1 Chi square value of Post-test knowledge level among primi gravidamothers with selected socio-demographic variables: N-200

Sr.No.	Socio-demographicVariable	Chi square	df	P value	Significant/Non-significant
1.	Age in years	1.215	3	0.027	S
2.	Religion	3.576	2	0.245	NS
3.	Educational status	2.365	4	.009	S
4.	Type of family	1.155	1	.041	S
5.	Monthly income in Rs.	6.356	3	0.745	NS
6.	Occupational status	6.328	3	0.654	NS
7.	Diet pattern	2.367	2	0.813	NS
8.	Period of gestation	5.324	3	0.441	NS
9.	Type of delivery	1.327	1	0.847	NS
10.	Gender of baby	1.573	1	0.458	NS
11.	Did you give first breast milk to your baby	0.021	1	0.001	S
12.	Are you doing exclusive breast-feeding	0.514	1	0.001	S
13.	Birth weight of baby	7.024	3	0.329	NS

The placed table 1 has revealed that the chi-square value among post-test knowledge level of primi gravaida mothers with selected demographic variables. The significance level measured at <0.05 . The analysis report revealed that few variables such as age in years ($p<0.027$), educational status ($p<0.009$), type of family ($p<0.041$), Did you give first breast milk to your baby ($p<0.001$) and Are you doing exclusive breast-feeding ($p<0.001$) found significantly associated with post-test knowledge level of primi gravaida mothers, as their calculated p value observed lesser than the assumed p value of <0.05 . Hence for these variables the research hypothesis H2 accepted, whereas for other variables religion ($p<0.245$), monthly family income in Rs. ($p<0.745$), occupational status ($p<0.654$), diet pattern ($p<0.813$), period of gestation ($p<0.441$), type of delivery ($p<0.847$), gender of baby ($p<0.458$) and Birth weight of baby ($p<0.329$) found non-significant, hence for these variables the research hypothesis H2 rejected.

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